



AGAWAM PUBLIC SCHOOLS

CREATING IN-DISTRICT PROGRAMS FOR STUDENTS WITH SEVERE EMOTIONAL AND BEHAVIORAL DISORDERS

A REGIONAL APPROACH TO IMPROVING SERVICE DELIVERY

JUNE 1, 2014



TABLE OF CONTENTS

INTRODUCTORY LETTER	3
EXECUTIVE SUMMARY	4
PARTICIPATING ENTITIES.....	4
GOALS	5
IMPLEMENTATION PLAN	5
BUDGET	6
CHALLENGES AND SOLUTIONS.....	7
OUTCOMES.....	8
CONTACT INFORMATION.....	8
REFERENCES	9
RESOURCES	20

INTRODUCTORY LETTER

June 1, 2014

In February 2013, the Agawam Public Schools received a \$110,800 Community Innovation Challenge (CIC) Grant to launch a project entitled *Creating In-District Programs for Students with Severe Emotional and Behavioral Disorders – A Regional Approach to Improving Service Delivery and Containing Costs*. The goal of the project was to increase the capacity of public schools to meet the needs of students with severe emotional and behavioral disorders through the development of an in-district therapeutic program and through better coordination of crisis and behavioral interventions services to support students in their public school placements. The project created a regional special education model serving Agawam and the member districts of the Lower Pioneer Valley Educational Collaborative. The project focused on containing special education costs without sacrificing program quality for students with significant social and emotional needs at the elementary school level.

In FY2013, the special education directors from districts which are members of the Lower Pioneer Valley Educational Collaborative (LVPC) met to discuss the coordination and delivery of services for young children with significant emotional and behavioral needs. The directors agreed that the majority of these students received services in out of district placements. Directors discussed their desire to provide services in a less restrictive setting (i.e., the public school environment), as well as the impact of out of district placements on school district budgets. As a result of the discussion, the special education directors decided to pursue a CIC grant to create a public school program and service coordination model that would simultaneously provide appropriate services for students with emotional and behavioral disorders in the least restrictive setting and result in cost avoidance for public school districts.

Thanks to the generous support of Governor Patrick's CIC program, Agawam developed a service coordination model and public school program that opened in September of 2013. This program now provides a trained, multi-disciplinary team to assess student behavioral and emotional needs, create intervention plans, and coordinate services for students to ensure the academic and social success of students who, prior to the creation of the program, would have been placed in a more restrictive setting out of district. This program has already generated substantial cost avoidance, reduced out-of-district enrollment, and, most importantly, positioned young children for academic and social success in a public school setting.

Given its success in FY2014, the program will continue as a self-sustaining program funded by the District. We look forward to sharing our story with other school districts and serving as a model for similar initiatives designed to contain spiraling special education costs.

Best Regards,

April Rist
Director of Student Services, Agawam Public Schools

EXECUTIVE SUMMARY

In February 2013, the Agawam Public Schools launched a project entitled *Creating In District Programs for Students with Severe Emotional and Behavioral Disorders* thanks to the generous support of a Community Innovation Challenge grant. The goal of this project was to increase the capacity of public schools to meet the needs of students with severe emotional and behavioral disorders through the development of an in district therapeutic program and better coordination of crisis and behavioral interventions services to support students in their public school placements.

Key successes of the program include improved outcomes for elementary age children with social and emotional disabilities, a decrease in out-of-district placements, and substantial cost avoidance for the District. Longer term goals include sustainability of the program in the District operating budget and enrollment in the program by multiple Hampden County communities.

In undertaking this project, challenges were initially faced in regionalizing services and building credibility for a new program designed to compete with the well-established out of district placements such as Valley West, the Center for School Crisis Intervention and Assessment, the New England Adolescent Research Institute, and Tri County School. Perhaps the greatest challenge was the desire of districts to duplicate the model rather than utilize the model. Many districts had an immediate need to provide an alternative to out of district placements for these students. Rather than wait for the program to be developed and the staff to be trained, districts were inclined to create their own programs. While this reduced the number of students we anticipated serving in year one of the project, it also spurred innovation. Districts shared effective practices. The need for public school placement options for young children with behavioral and emotional needs persists. Agawam anticipates referrals from districts throughout the region in FY2015.

PARTICIPATING ENTITIES

The Lower Pioneer Valley Educational Collaborative (LPVEC), organized in 1974, is a group of seven school districts legally bound in a collaborative governance structure under the provisions of Chapter 40, Section 4E, and Chapter 797 of the General Laws of the Commonwealth of Massachusetts. The member school districts are: Agawam, East Longmeadow, Hampden-Wilbraham Regional, Longmeadow, Ludlow, Southwick-Tolland-Granville Regional, and West Springfield. The LPVEC is governed by a Board of Directors (School Committee) comprised of one representative from each of the member school committees. The LPVEC's current budget is approximately \$20 million and it employs approximately 360 staff.

The primary purpose of the LPVEC is to expand the quality of education in the member school districts. Basic to the LPVEC's efforts is the premise that there are numerous educational services that can be provided more effectively and efficiently by pooling the resources and students from several school districts. Since March of 1975, the LPVEC has been able to substantially broaden the quantity and quality of educational programs and services available within the participating school districts. The LPVEC has collaborated with its membership to develop and deliver special education programs and services.

The LPVEC provides services to students aged 5 to 22 years who demonstrate a wide variety of exceptional learning needs including adjustment and behavioral problems, learning disabilities, Autism, PDD, Asperger's Syndrome, and developmental disabilities. Students are referred to the LPVEC for services when they present needs for specially designed instruction that cannot be delivered effectively within the traditional classroom.

The district of Agawam partnered with the Lower Pioneer Valley Educational Collaborative and its membership in undertaking the project. In addition, the districts of East Longmeadow, Hampden-Wilbraham, Longmeadow, Ludlow, Southwick-Tolland-Granville, and West Springfield submitted letters in support of the grant application. While the district of Agawam is the lead entity for the project, any district may refer a student for services or evaluation on a tuition basis.

Special education directors from member districts met quarterly to discuss the program. Directors discussed students who would benefit from the program as well as monitoring progress of students receiving services. Directors also met with regional service providers in order to ensure services reflected research-based practices.

GOALS

In order to achieve the project goals of increasing the capacity of public schools to meet the needs of students with severe emotional and behavioral disorders and to better coordinate crisis and intervention services for students, project personnel identified the following objectives:

1. Convene mental, behavioral, medical and social service providers, as well as representatives from the Massachusetts Association of Approved Private Schools to identify available mental health resources in the region;
2. Develop crisis response and coordination protocols for children in crisis;
3. Develop Memorandums of Understanding (MOUs) with regional service providers delineating the resources they will make available to assist with crisis situations and to train school districts to better support students with social and emotional problems that interfere with learning;
4. Create an in-district therapeutic program housed in a public school; and
5. Coordinate and deliver in-service training based on input from regional service providers to ensure staff are well trained to meet the needs of students in therapeutic placements.

IMPLEMENTATION PLAN

The District's project implementation plan comprised marketing, referral and enrollment of students, staffing, selection of materials, and teacher training. Upon receipt of grant funding, Agawam and the LPVEC met with district representatives to identify priority needs and areas of concern. Based on the input of district special education directors, Agawam and the LPVEC

created a program description for staff and LPVEC member districts to use as a guide in referring students.

In the spring of 2013, Agawam hired a teacher and project coordinator. The project coordinator was responsible for monitoring outcomes and benchmarks associated with the project and for ensuring that the project adhered to the timeline. During this time period Agawam and the LPVEC created an agreement delineating roles and responsibilities of each agency involved in the project.

In the summer of 2013, the project coordinator convened a meeting of regional service providers to design crisis response protocols. An outcome of the meeting was the development of an MOU delineating commitment, availability, and costs for service teams to support schools. Prior to the start of the 2013-2014 school year, Agawam provided two full days of Safety Care training for fourteen staff.

During the first semester of the 2013-2014 school year, the project coordinator convened regular meetings of regional service providers to formatively assess the functionality and effectiveness of crisis response and intervention and program design. The project coordinator provided additional professional development on effective programming and interventions for students with social, emotional, and behavioral issues.

Throughout the school year, the special education director of Agawam Public Schools held bi-weekly team meetings with staff in the program to review student academic and behavioral data, case counsel, and develop intervention plans. The project coordinator met regularly with special education directors in the region to share on promising practices developed in the program, discuss referrals, and review progress on project goals.

BUDGET

The District received \$110,800 in grant funding to launch an in district program for elementary age students with social and emotional disorders. This budget included partial contribution to certified personnel, crisis coordinator stipend, staff training, and counseling support services.

Budget for Program:

Budget Item	Amount Requested	Actual Expenditure*
Certified Personnel	\$64,919.20	\$64,919.20
Crisis Coordinator	\$7,100.00	\$7,100.00
Counseling Support Services	\$27,580.80	\$27,580.80
Staff Training	\$11,200.00	\$11,200.00
CIC Grant Total	\$110,800.00	\$110,800.00
District Contribution**	\$64,981.40	\$64,981.40
Grand Total	\$175,781.40	\$175,781.40

*Anticipated actual expenditures by the end of academic year, 2014.

****District contribution is based on three full time equivalent (FTEs) paraprofessional positions, 0.2 FTE school counselor position, and approximate number of in kind hours for the Director of Special Services, the Supervisor of Special Services, and the building principal.**

In September of 2013, the special education director for Agawam Public Schools determined that students being referred to the program required Speech and Language Services (SLP), specifically pragmatics. Pragmatic speech is language used to communicate and socialize. Pragmatic skills are the way a person uses language in social contexts. Incorporating verbal and nonverbal communication, pragmatic skills are the essence of communication. In order to fund a 0.2 SLP position, the director reallocated \$9,919.20 from the counseling support services to certified personnel.

CHALLENGES AND SOLUTIONS

Overall, the planning and implementation of the project was a success. The Community Innovation Challenge grant award in February 2013 afforded the District substantial time for planning, training, and hiring, which was essential to the success of the new program.

Challenge: Changing the mindset and culture of educators from thinking of Early Elementary Intervention Transition Team (EEITT) as a program, to thinking of it as a team that identifies and implements individualized services to avoid placement in a substantially separate program proved to be a challenge. Many educators and educational administrators tend to think of special education services as "programs" where we send students - particularly those who have social, emotional, and behavioral issues. Some educators feel that students with social, emotional, and behavioral challenges are disruptive to the learning environment and detract from the learning of other students. Thinking outside of the box to attempt to change behavior so that students can remain in the least restrictive environment (the general education classroom) is hard work that requires support and training.

Solution: Engaging administrators in frequent discussions regarding the purpose of the team proved helpful. Providing them with materials that clearly explain the types of services that the EEITT can provide, how these services are provided, and the purpose of the services was also helpful.

Challenge: Another challenge in this endeavor has been that despite the desire for the district to work collaboratively with current private special education schools in order to capitalize on the expertise of the staff from those programs in an attempt to maintain students in the home school, some private schools were resistant to do so.

Solution: Engaging leaders of private special education schools in the discussion about their role in providing services to school districts who are attempting to maintain students in the public school setting has been helpful. Including the area representative from the Massachusetts Association of Approved Private Schools has been crucial in getting these schools involved in these conversations and helping them to understand how they might be able to provide alternative supports to local education agencies.

OUTCOMES

In the original grant proposal the District targeted three measures of success for the project:

- Decrease number of students placed out-of-district
- Cost-avoidance figures (per pupil cost of program versus out-of-district alternatives)
- MOUs between the public school program and regional service providers

As of this final report, the District has not referred any early elementary age students with emotional disorders to out-of-district placements. This is a stark contrast to SY2012-2013 when the District had five referrals for students with emotional and behavioral disorders in the early elementary grades. The five referrals resulted in an increase of more than \$200,000 in FY13. Cost-avoidance for the program in the 2013-2014 school year is projected at over \$200,000.

The project created a sustainable partnership between Agawam Public Schools and Behavioral Health Network (BHN). BHN provides counseling and support students to students in the program during the school day ensuring that students receive the services they need and that obstacles families may face (e.g., transportation) do not interfere with students receiving support.

In summary, the District's implementation of the project exceeded expectations for student progress, reduced out-of-district placements, and provided substantial cost avoidance. The team's credibility is now established and Agawam anticipates additional referrals in the 2014-2015 SY.

CONTACT INFORMATION

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REFERENCES

Reference #1

Early Elementary Intervention and Transition Team (EEITT)

Vision

The EEITT provides students in grades Pre-K through 2 with a range of social, emotional, and behavioral services designed to stabilize a student's behavior, thereby allowing that student to access the general education curriculum in the least restrictive environment. The team mobilizes supports for the student in the form of school personnel, outside clinical services, and community supports to provide the student and his/her family with the supports that they need in order for the child to have a meaningful academic experience.

History

Special Education Directors from the Lower Pioneer Valley Educational Collaborative convene regularly to discuss current issues and collaborate on resources. During the 2011-2012 and 2012-2013 school years, a consistent theme that emerged repeatedly was the increasing number of early elementary students (Pre-K through grade 2) who were experiencing significant social, emotional, and behavioral issues in the school setting. Sadly, many of our districts did not have the capacity in our schools to be able to stabilize and maintain these students, which often times resulted in a reliance on out-of-district placements.

Though most would agree that there is truth in the cliché, "It takes a village to raise a child", parents often look to the most immediate resource – the school – for support. Unfortunately, public education alone cannot provide the level of care and support that these families need. As such, the EEITT is an effort to collaborate with community resources and outside agencies in an attempt to provide wrap-around care for these young children in the least restrictive environment.

Supports and Services

The EEITT is designed to allow the district to convene in-house social, emotional, behavioral, medical, and social service providers, as well as representatives from the Massachusetts Association of Approved Private Schools to identify resources in the region. Short-term intervention is provided immediately so students do not have to be sent to out-of-district placements, while training in-district staff to get students back into the classroom. Students are stabilized with the collaboration of outside agencies, and ultimately teach staff how to get through emotional and behavioral disturbances using methods of ABA and appropriate behavioral health and coping strategies. Students are linked to services that wouldn't typically be available to students this young, with the hope to avoid long-term, private placements or hospitalization. Based on the recommendations of the EEITT, student referred would be aligned with the appropriate supports, based on their type and level of need. Students from all LPVEC member districts are eligible for consideration for referral to the team.

Roles and Responsibilities

Director and Supervisor of Special Services, APS

- Collaborate with building principal and project coordinator regarding referrals, staffing assignments, current students being seen by the team, and project issues/concerns
- Coordinate Professional Development and training activities for project staff
- Provide on-site guidance and support to project staff via regular meetings

Project Coordinator

- Ensure that all referral documents are collected for each referral
- Complete initial observations for referrals
- Make initial recommendations to the team regarding next steps and recommend appropriate service providers to be involved
- Assist in progress monitoring, as needed
- Provide professional development and consultation to project staff, as needed

Building Principal

- Provide on site guidance and support to project staff for students assigned to the classroom
- Facilitate inclusion opportunities within the school, as appropriate based on the student's school of origin

Project Special Education Teacher

- Provide instruction/planning for students assigned to the classroom
- Support classroom staff (general education and special education) in implementing accommodations and modifications effectively in the classroom
- Oversee classroom and individual behavior plans
- Provide guidance, training, consultation to classroom and general education staff, as needed
- Assess educational and behavioral needs of students referred to the team and assigned to the classroom

Project Paraprofessionals

- implement program and individual behavior intervention plans to fidelity
- collect data as directed by the SPED teacher/behavior interventionist

Contracted Behavioral Health Service Providers

- Provide on-site mental health/clinical services
- Collaborate with and recommend community-based family services (including, but not limited to clinical services, counseling, medical services, and family support services)
- Coordinate with and support project staff, special education staff, and general education staff regarding clinical needs and recommendations for students referred to the team and assigned to the classroom
- Provide training and consultation to project staff and families as needed
- Assess clinical needs of students referred to the team

Behavior Interventionist, APS

- Provide support, training, and recommendations for Agawam students referred to the team and assigned to the classroom
- Complete functional behavioral assessments and design behavior intervention plans for Agawam students referred to the team and assigned to the classroom
- Complete observations and make recommendation for students referred to the team
- Collaborate with school-based staff to support and implement appropriate behavior plans for students in the least restrictive environment

School Counselors, APS

- Identify students for possible referral to the team
- Collaborate with team members to identify resources within the school to support student inclusion
- Provide school counseling services to students referred to the team and/or assigned to the classroom
- Assist in implementation and/or monitoring of behavior intervention plans for students referred to the team and/or assigned to the classroom

Reference #2

Agawam Public Schools
Department of Special Services
760 COOPER STREET
AGAWAM MA 01001
Tel: 413-821-0540
Fax: 413-821-0539

THIS DOCUMENT IS FOR EEITT CLASSROOM STAFF USE ONLY

Early Elementary Intervention and Transition Team (EEITT)
General Program Criteria

Criteria for Integrating/Fading Supports (for students placed IN the EEITT classroom)

- (1) Consider the student's strengths
 - identify the subject matter, then determine the amount of time
- (2) Prior to re-entry, staff from the EEITT will have observed the EEITT team-identified appropriate educational environment
 - EEITT staff will recreate, to the extent possible, the environment into which the child will be integrated
- (3) The amount of time integrated into the EEITT team-identified appropriate educational environment should be based on the baseline data collected in the program and divided in half
 - If student is able to sit appropriately and engage for 30 minutes in the EEITT classroom, he should be integrated for 15 minutes into the general education classroom
- (4) When a student re-integrates into the EEITT team-identified appropriate educational environment, EEITT staff will initially go with him or her to support the transition
- (5) A systematic, written plan for systematically fading adult supports while increasing time in the EEITT team-identified appropriate educational environment will be created for each child
 - this written plan should be shared with the classroom teacher in a providers meeting (to include the teacher, principal, para, and counselor)
- (6) Individualized data will be collected on "successful integration" for each child
 - BCBA consultant will work with the classroom staff to develop data collection and criteria for each individual student regarding what "successful integration" into the EEITT team-identified appropriate educational environment means for that child (i.e. engaged independently without redirection; proximity of para/adult etc.)

Exit Criteria

- (1) Individualized data will be collected on "successful integration" for each child (see above)
 - BCBA consultant will work with the classroom staff to develop data collection and criteria for each individual student regarding what "successful integration" into the EEITT team-identified appropriate educational environment means for that child and when the child is ready to be fully integrated
- (2) An exit meeting will be held to develop an individualized written transition plan
 - EEITT staff and the classroom teacher to be involved
 - Specific timelines will be included

- the child will be able to access the curriculum and integrate into the EEITT team-identified appropriate educational environment with a reasonable BIP with or without additional supports
- (3) Modeling and training for staff will be provided by the EEITT staff, as needed

Conditions of the EEITT classroom

- Reverse inclusion will be utilized (if possible)
- peer models from the Connections program
- The classroom has to mimic the general education classroom as much as possible
- Increase the environment to be more stimulating
- ex. workboards - - have them do it independently in stations
- The focus should ALWAYS be on fading support for ALL staff

Reference #3

Agawam Public Schools/BHN

EEITT Mental Health Consultation Referral Form

Name _____ DOB _____ Date referred _____

Parent name(s) _____ Phone _____

School _____ Teacher _____ Phone _____

Language preferred _____ Does the student have an IEP? Yes No

Reason(s) for Referral:

Duration of symptoms/History of problem:

Past Interventions _____

Current services _____

Recent stressors _____

Health issues/medications _____

Home functioning _____

School functioning _____

Interests _____

Needs _____

Strengths _____

Reference #4

Behavioral Health Network- Purchased Services Agreement 2013-2014 Academic Year

AGREEMENT made by and between Behavioral Health Network, Inc. (BHN/CGC), 417 Liberty Street, Springfield, MA 01104 and the Agawam Public Schools, 1305 Springfield Street, Feeding Hills, MA 01030.

A. Scope of Services

ELEMENTARY SCHOOL

Elementary Community Mental Health Consultant

BHN staff will be available for 2 hours weekly to work with the Agawam Elementary Prevention Services team. The BHN staff will provide community mental health services as deemed appropriate by BHN and the Agawam EPS team. Services may include the following:

- Family
 - o Outreach and engagement with family
 - o Comprehensive assessment of psychosocial needs of family
 - o Care coordination with child and family to connect them with needed support services in the community.
- Child
 - o Classroom observation of social/emotional/ behavioral functioning
 - o Child psychosocial assessment
- Team
 - o Participation on AEPS team
 - o Recommendation to AEPS team regarding psychosocial needs of the child

Total Cost \$5750-(2 hours weekly for 36 weeks)

Site-based Mental Health

BHN community mental health consultant will provide on-going treatment for families referred through the elementary schools as appropriate if the family is interested in receiving services. Contract funds will pay for minimal start up time at the school for the clinician as well as BHN administrative support to track and offer support for clinician and school personnel questions. All subsequent services will be billed to third party medical insurance. These services will be offered initially at Robinson Park and Phelps Schools. Additional schools may be added as requested and as funds allow.

Total cost:\$2000

HIGH SCHOOL

Substance Abuse Assessment and Support Services-

Behavioral Health Network (BHN) staff will provide a range of services to the Agawam Public Schools (APS), to support those students experiencing substance abuse challenges, and their families. Services will be provided for a minimum of 4 hours per week and may include the following:

- Assessment and recommendation of services for students suspended from school due to substance use issues.
- Upon receiving an appropriate referral from APS, BHN will conduct a screening as well as a needs and strengths assessment with the student and family, with a focus on substance use/ abuse.
- BHN will provide recommendations to the family and to the school administrators regarding treatment needs.
- BHN will assist the family in accessing whatever treatment options are deemed necessary by the school (if appropriate) or those that are of interest to the family.
- Support of students, families and school staff in the transition process when returning to school from an out of district substance abuse treatment placement.
- Upon receiving an appropriate referral from APS, BHN will make contact with sending institution, family and APS counselor to develop an appropriate after-care and re-entry plan for the student.
- BHN will support the student, family and staff in getting necessary services in place.
- If there are no children in need of screening/ referral or transition/aftercare planning then the contract hours would be used for any of the following:
- Substance abuse treatment advice to Agawam students and families, as deemed necessary and appropriate.
- Prevention education sessions in identified classrooms or schools in the district.
- Prevention activities with high-risk children at identified schools in the district
- Parenting education program dealing with the topic of parents as collaborative partners in prevention.
- Support to APS staff on implementing the S-BIRT Model (Screening, Brief Treatment and Intervention Model).
- Should the family wish to engage in substance abuse treatment with BHN, BHN will provide an evidenced-based practice intervention called Assertive Adolescent and Family Therapy. This treatment is comprised of Assertive Adolescent and Community Reinforcement Approach and Assertive Community Care. These services will be reimbursed by the individual family's medical insurance. Services may or may not be delivered on-site in the school; location of services will be determined by the family, school and BHN staff based on need and appropriateness.

General site-based behavioral health treatment

BHN will provide a therapist to accept referrals and see students in therapy on-site in the school during school hours. Contract funds will help support minimal start up time for clinician as well as BHN administrative staff (for data and accountability tracking and coordination with school personnel). All subsequent services will be billed to third party medical insurance.

Site-based mental health services will be provided at Agawam High School as deemed appropriate by school, family and BHN staff. BHN may also provide community support and case management services (for Masshealth clients) paid for by family medical insurance.

Total cost: \$11,500. (Services provided September – June- billed at \$1150/month); Contract costs cover 4 hours/ week of dedicated time as outlined above. Time allotted to treatment services will be determined by number of referrals and will expand to meet the need.

DOERING SCHOOL and JUNIOR HIGH SCHOOL

Site-based behavioral health treatment

BHN will provide a therapist to accept referrals and see students in therapy on-site at the Doering School and the Junior High School during school hours. All services will be billed to third party medical insurance. No additional consultations or engagement services will be provided unless paid for by third party insurance. If these services are needed, and Agawam Public Schools deems necessary, contract funds may be allocated from other line items to support non-third party billable activity.

No cost to the district

B. Time of Performance

The services of BHN/CGC may be available starting 10/01/13 and continue up to and including 6/30/2014.

C. Method of Payment

Unless this agreement is amended, the Contractor shall compensate BHN \$2139/ month commencing in October 2013. Maximum obligation will be \$19,250 unless additional hours are requested and agreed upon by both parties.

D. Assignability

The Contractor agrees that he shall not assign any interest in this Agreement, whether by assignment or novation, without the prior written approval of all individuals who are party to this agreement.

E. Entire Agreement Contained Herein

It is understood that the entire Agreement between parties is contained herein, and that this agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof.

F. Suspension or Termination

Either party may suspend or terminate this Agreement in whole or in part with a thirty (30) day written notice of intent to terminate.

IN WITNESS HEREOF, Behavioral Health Network, Inc., and the Agawam Public School District have executed this Agreement.

BEHAVIORAL HEALTH NETWORK, INC.

BY:

Katherine B. Wilson, CEO

Agawam Public Schools

BY:

RESOURCES

Think: Kids Collaborative Problem Solving Safety Care Quality Behavioral Solutions to Complex Behavior Problems

Lead Applicant:

Town of Agawam

Project:

Creating in District Programs for Students with Severe Emotional and Behavioral Disorders

PROJECT GOAL	MEASURE	CURRENT PERIOD	PRIOR PERIOD	TREND	TARGET	STATUS	COMMENTS
To develop a regional program for students with severe emotional and behavioral disorders	# of students receiving crisis intervention and behavioral support services	3	9		2014 =20 students served; +20 every year	On target	Fewer students required direct service. We are exploring the idea that increased staff capacity has resulted in a decrease of behavior problems.
	# of service providers that sign MOUs to provide crisis intervention services to public school districts	2	0		2014 = 5 2015 = 5 Total =10	Off Target	Agawam anticipates meeting its target in FY15
	# of staff trained in behavioral supports	5	14		6/2014=20;+20 every yr	On Target	
	Cost avoidance (amt of \$ district would have spent for OOD placement – cost incurred for in-district program)	\$118,560.82	\$32486.22	Total savings for students who would have otherwise been served in OOD placements in FY '14 will be \$151047.94	\$205,000	Close to Target	Additional cost avoidance because students were able to be given services while remaining in the district. The total estimated cost avoidance for these students is estimated at approximately \$29,824. Total cost avoidance = \$180,871
STATUS LEGEND	OFF TARGET:		CLOSE TO TARGET		ON TARGET:		NOT APPLICABLE: